В.

C.

SCHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE I	NUMBER: PAGE 107/108
ITEMIZED DISBURSEMENTS	for each category of the	(check only	one) 17
	Detailed Summary Page		20a 20b 20c X 21
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
Wally Herger For Congress Committee			
Full Name (Last, First, Middle Initial) Glenn Medical Foundation			Transaction ID: B-E-59494 Date of Disbursement
Mailing Address PO Box 1041			$\begin{bmatrix} \begin{smallmatrix} M & 8 \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 2 \\ 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} Y$
City Willows	State Zip Code CA 95988-1041		Amount of Each Disbursement this Period
Purpose of Disbursement Donation		012	250.00 Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburse Senate President State: District:	ment For: 2008 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: B-E-59568
National Republican Congressional Committee			Date of Disbursement
Mailing Address 320 1st Street SE			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ 0 & 1 & 0 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix} \end{bmatrix}$
City Washington	State Zip Code DC 20003-1838		Amount of Each Disbursement this Period
Purpose of Disbursement Transfer Excess Campaign Funds		011	100000.00 Refund or Disposal of Excess
Candidate Name National Republican Congressional Comm	ittee	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Senate President	ment For: 2008 Primary X General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: B-I-60011
Tom McClintock For Congress			Date of Disbursement
Mailing Address 2150 River Plaza Drive Suite 150			0 9 M / D 1 5 / Y 2 0 0 8 Y
City Sacramento	State Zip Code CA 95833-4131		Amount of Each Disbursement this Period
Purpose of Disbursement Fundraising Letter Expenses 011			301.12 Refund or Disposal of Excess
Candidate Name Thomas McClintock		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Senate President	ment For: 2008 Primary X General Other (specify) ▼		Inkind Donation Made
State: CA District: 04			
SUBTOTAL of Disbursements This Page (optional)		<u></u>	100250.00

TOTAL This Period (last page this line number only)